-								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO								RD // 7. / 2. 7.					
			10/106243										
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS					·		RA'	ΓĒ	FEE	7	RATE	FEE	
FOR			NUMBER FILED .		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		*		xs	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			L	inus 3 =	*		X43=			OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT							+145=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2							тот	AL		OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY			
Ė		CLAIMS		HIGH		(Coloniii 3)			ADDI-	1		ADDI-	
NT A		REMAINING AFTER AMENDMENT		PREVICE PAID I	USLY	PRESENT EXTRA	RAT	Έ	TIONAL		RATE	TIONAL FEE	
AMENDMENT A	Total	• 7	Minus	 2		= /	X\$ 9) =		OR	X\$18=		
	Independent	. 2	Minus	3	5 1.444.4	=	X43	=		OR	X86=		
	FIRST PRESE	ENTATION OF MI	JUTIPLE DEI	PENDENT	CLAIM		+145	i=		OR	+290=		
Ser 1								TAL		ا ا	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS		HIGH					ADDI-	ı		ADDI-	
		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA	PAT	Ε	TIONAL FEE		RATE	TIONAL FEE	
	Total	. 21	Minus	2	0	= /	X\$ 9	=	9.00	OR	X\$18=		
	FIRST PRESENTATION OF MULTIPI		Minus	EPENDENT CLAIM		= /	X43=		43.00	OR	X86=		
!	, morriede	MANON OF THE		LINDLIN	00/1111	<u> </u>	+145	=		OR	+290=		
								AL EE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)								•					
NTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	RATI		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
E	Total .	*	Minus	**		=	X\$ 9	_	ì	OR	X\$18=	rce	
⊰	Independent	*	Minus	***		E	X43=	\dashv			X86=		
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		-	\dashv		OR			
± f	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
** If	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE		
		ber Previously Palo					ound in the	арр	ropriate box	in colu	ımn 1.		